

County: Kenosha  
 SHERIDAN MEDICAL COMPLEX  
 8400 SHERIDAN ROAD

Facility ID: 8170

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KENOSHA 53143 Phone: (262) 658-4141  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/03): 92  
 Total Licensed Bed Capacity (12/31/03): 102  
 Number of Residents on 12/31/03: 90

Ownership:  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 82

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		25.6
Supp. Home Care-Personal Care	No					1 - 4 Years		34.4
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	25.6	More Than 4 Years		7.8
Day Services	No	Mental Illness (Org./Psy)	28.9	65 - 74	14.4			-----
Respite Care	No	Mental Illness (Other)	3.3	75 - 84	24.4			67.8
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	31.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	6.7	95 & Over	4.4	Full-Time Equivalent		
Congregate Meals	No	Cancer	10.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	4.4		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	17.8	65 & Over	74.4	-----		
Transportation	No	Cerebrovascular	16.7		-----	RNs		9.9
Referral Service	No	Diabetes	5.6	Gender	%	LPNs		11.2
Other Services	Yes	Respiratory	3.3		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	3.3	Male	43.3	Aides, & Orderlies		
Mentally Ill	No		-----	Female	56.7			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	18	100.0	318	52	92.9	117	4	100.0	192	12	100.0	192	0	0.0	0	0	0.0	0	86
Intermediate	---	---	---	4	7.1	98	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	18	100.0		56	100.0		4	100.0		12	100.0		0	0.0		0	0.0	90	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	10.6	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	1.2	Bathing	26.7	44.4	28.9	90
Other Nursing Homes	1.8	Dressing	22.2	53.3	24.4	90
Acute Care Hospitals	85.3	Transferring	18.9	53.3	27.8	90
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	16.7	48.9	34.4	90
Rehabilitation Hospitals	0.0	Eating	43.3	20.0	36.7	90
Other Locations	1.2	*****				
Total Number of Admissions	170	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	10.0	Receiving Respiratory Care		6.7
Private Home/No Home Health	11.8	Occ/Freq. Incontinent of Bladder	40.0	Receiving Tracheostomy Care		5.6
Private Home/With Home Health	15.3	Occ/Freq. Incontinent of Bowel	33.3	Receiving Suctioning		5.6
Other Nursing Homes	1.8			Receiving Ostomy Care		3.3
Acute Care Hospitals	51.8	Mobility		Receiving Tube Feeding		6.7
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	2.2	Receiving Mechanically Altered Diets		33.3
Rehabilitation Hospitals	0.0					
Other Locations	7.6	Skin Care		Other Resident Characteristics		
Deaths	11.8	With Pressure Sores	2.2	Have Advance Directives		26.7
Total Number of Discharges		With Rashes	6.7	Medications		
(Including Deaths)	170			Receiving Psychoactive Drugs		22.2

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	80.0	86.2	0.93	87.6	0.91	88.1	0.91	87.4	0.92
Current Residents from In-County	88.9	78.5	1.13	83.0	1.07	82.1	1.08	76.7	1.16
Admissions from In-County, Still Residing	25.3	17.5	1.44	19.7	1.29	20.1	1.26	19.6	1.29
Admissions/Average Daily Census	207.3	195.4	1.06	167.5	1.24	155.7	1.33	141.3	1.47
Discharges/Average Daily Census	207.3	193.0	1.07	166.1	1.25	155.1	1.34	142.5	1.46
Discharges To Private Residence/Average Daily Census	56.1	87.0	0.64	72.1	0.78	68.7	0.82	61.6	0.91
Residents Receiving Skilled Care	95.6	94.4	1.01	94.9	1.01	94.0	1.02	88.1	1.08
Residents Aged 65 and Older	74.4	92.3	0.81	91.4	0.81	92.0	0.81	87.8	0.85
Title 19 (Medicaid) Funded Residents	62.2	60.6	1.03	62.7	0.99	61.7	1.01	65.9	0.94
Private Pay Funded Residents	13.3	20.9	0.64	21.5	0.62	23.7	0.56	21.0	0.64
Developmentally Disabled Residents	0.0	0.8	0.00	0.8	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	32.2	28.7	1.12	36.1	0.89	35.8	0.90	33.6	0.96
General Medical Service Residents	3.3	24.5	0.14	22.8	0.15	23.1	0.14	20.6	0.16
Impaired ADL (Mean)	52.4	49.1	1.07	50.0	1.05	49.5	1.06	49.4	1.06
Psychological Problems	22.2	54.2	0.41	56.8	0.39	58.2	0.38	57.4	0.39
Nursing Care Required (Mean)	8.8	6.8	1.29	7.1	1.24	6.9	1.27	7.3	1.19